



NHSC UPDATE!

Uniting Communities in Need
With Clinicians Who Care

Dear Partner:

As you know, the FY 2001 NHSC Loan Repayment Program Applicant Information Bulletin (AIB) was recently mailed. To date, nearly 2,800 Bulletins have been sent to callers who have requested them. For this issue of NHSC Update! we are including some Frequently Asked Questions that have been generated by the application process. We hope you will find the information helpful as you assist potential applicants in your regions. As always, we welcome your questions and feedback. Please e-mail us at NHSCupdate@matthewsgroup.com.

Frequently Asked Questions About the FY 2001 NHSC Loan Repayment Program Contract Application Process

1. How long after an applicant submits a contract application will he or she receive the acknowledgment card verifying that the application is being reviewed?

The "acknowledgement card" requests acknowledgement of receipt of an FY 2001 NHSC LRP contract application by the Division of Scholarships and Loan Repayments (DSLRL). Applicants who submit completed acknowledgement cards (applicants are requested to provide return addresses) will have these cards mailed back to them by DSLRL within 2-workweeks from receipt by DSLRL. However, there may be instances because of the U.S. mail that the 2-workweek timeframe (the applicant's actual receipt of the "acknowledgement card") cannot be honored.

2. Do you have to be an employee of the community site or can you be a contractor? What is the difference in status?

As stated in Section G of the FY 2001 NHSC LRP AIB, every participant is required to engage in the full-time clinical practice of his or her profession at an NHSC LRP community site. As long as the service commitment is met, it does not matter if the participant is an employee of the community site or an independent contractor.

It is important to note that NHSC LRP **contract awardees** must complete a Private Practice Assignment (PPA) Agreement or a Private Practice Option (PPO) Agreement. A copy of the appropriate Agreement may be obtained from your HRSA Field Office representative (see pages 78-79 of the FY 2001 NHSC LRP AIB).

A copy of the completed PPO or PPA Agreement must be sent to the HRSA Field Office representative (see pages 78-79 of the FY 2001 NHSC LRP AIB) and the Division of Scholarships and Loan Repayments (see front cover of FY 2001 NHSC LRP AIB for address information).

Submission of the PPA or PPO Agreement is required prior to the disbursement of NHSC LRP loan repayment funds (see item 6 on page 35 of the FY 2001 NHSC LRP AIB). Health care clinicians who receive an FY 2001 NHSC LRP contract award are advised to complete and submit the PPA or PPA Agreement as soon as possible to ensure timely disbursement of loan repayment funds. The PPA and PPO Agreements also provide a lot of information on the responsibilities of NHSC LRP health care clinicians.

3. What is the role of the NHSC LRP applicant in the FY 2001 contract award process?

NHSC LRP clinician applicants are responsible for:

- a. Ensuring they are currently employed by or in negotiations for employment with eligible community sites in a HPSA at the time of application for an NHSC LRP contract award. Listings of eligible community sites and HPSA scores may be found on the NHSC Vacancy List on the NHSC Web site at <http://www.nhsc.bphc.hrsa.gov/>.
- b. Ensuring, through careful review of all application materials, that they meet all eligibility criteria for participation in the FY 2001 NHSC LRP (see FY 2001 NHSC LRP AIB).
- c. Ensuring that a complete application is submitted by April 30, 2001 (postmark date) (see FY 2001 NHSC LRP AIB Checklist on pages 35-36); incomplete applications will not receive further consideration for an NHSC LRP contract award.
- d. Ensuring completion of the FY 2001 NHSC LRP AIB Checklist (see pages 35-36).
- e. Submitting as part of a complete FY 2001 NHSC LRP contract application, documentation on Selected Program Eligibility Requirements (see pages 15-16 of the FY 2001 NHSC LRP AIB), including (as applicable):
 - Copy of specialty board certification or residency completion certificates

- Copy of license
- Community Site Information Form
- National Practitioner Data Bank/Healthcare Integrity and Protection Data Bank final report
- Documentation from employer showing completion of existing service obligation

The items listed above are required to be submitted by April 30, 2001 (postmark date), as a part of a complete application. However, if there are circumstances that prevent an applicant from supplying this documentation at the time the application is submitted, the applicant will have until no later than August 31, 2001 (postmark date), to submit the items listed above. If the August 31, 2001, deadline is not met, the application will be considered ineligible. (See pages 15-16 for specific instructions.)

- f. Ensuring that all applicable application materials (see FY 2001 NHSC LRP AIB Checklist on pages 35-36) are no more than 6 months old from the postmark date of the submitted FY 2001 NHSC LRP 2-year contract application.
- g. Understanding that if an applicant receives an FY 2001 NHSC LRP contract award, the start date of the participant's service commitment will begin no earlier than the date the NHSC LRP contract is countersigned by the Director, Division of Scholarships and Loan Repayments and no later than September 30, 2001 (the last day of the fiscal year).
- h. Understanding that no service credit will be given for employment at a community site before the effective date of an NHSC LRP contract award.
- i. Understanding that NHSC LRP participants cannot be guaranteed the full repayment of qualifying educational loans (i.e., cannot be guaranteed the award of an amended contract in future fiscal years).
- j. Understanding that funds provided under the NHSC LRP for loan repayment must be used to repay qualifying educational loans.
- 4. What are the consequences for the applicant who breaches his or her FY 2001 2-year contract award?**

Participants who fail to complete at least 1 year of service under the initial 2-year NHSC LRP contract must repay all loan repayment funds received under the NHSC LRP contract, plus \$24,000 (\$1,000 for each month of the period of obligated service), within 1 year of the date of default.

For example: Dr. Jones received \$50,000 for loan repayments under a 2-year NHSC LRP contract. He began

his service commitment on September 1, 1998. He subsequently ended his service on July 1, 1999. This placed Dr. Jones in default. As a result, he owes \$74,000 (\$50,000 plus \$1,000 x 24 months—the length of the contract). If his debt is not paid in full by July 1, 2000, interest begins accruing.

Participants who complete at least 1 year but less than 2 years of service under the initial 2-year NHSC LRP contract must repay all loan repayment funds received under the NHSC LRP contract, plus \$1,000 for each month of service not completed. Payment is due within 1 year of the date of default.

For example: Dr. Smith received \$40,000 for loan repayments under a 2-year NHSC LRP contract. She began her service commitment on September 1, 1998. She subsequently ended her service on October 1, 1999. This placed Dr. Smith in default. As a result, she owes \$51,000 (\$40,000 plus \$1,000 x 11 months—the number of months of unserved obligation). If her debt is not paid in full by October 1, 2000, interest begins accruing.

Certified Nurse-Midwives: A Win-Win Situation for Your Community NHSC Clinicians Currently Available

Statistics speak unanimously for adding certified nurse-midwives (CNMs) to your community. As part of a team of health care providers, they can mean an increase in access to quality care for women and children as much as 20 percent. One dedicated professional taking responsibility for a significant sector of the patient population helps health care administrators contain costs and allows medical directors to deploy other medical staff more effectively.

Department of Health and Human Services studies have proven that patients under the care of CNMs experience fewer neonatal intensive care admissions, Cesarean sections, episiotomies, and infant/maternal deaths; higher birth weights; and more vaginal births after previous Cesareans (VBACs). In short, CNMs represent an all-round win-win situation for the patient, the site, and community.

The NHSC has qualified CNMs for immediate placement in your community. For more information, contact the Community Support Branch at (301) 594-4165.

The National Heart, Lung, and Blood Institute Launches a Health Information Network

The National Heart, Lung, and Blood Institute (NHLBI) has launched a new electronic information resource for health professionals. The Health Information Network provides

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information and educational opportunities related to NHLBI's key research finding, clinical guidelines and advisories, programs, and services. Health Information Network members will receive at no cost e-mail notices that include Health Action E-Bulletins, HeartMemo and AsthmaMemo, online continuing education, and webcasts. To sign up for this service, go to the NHLBI Web site at <http://hin.nhlbi.nih.gov>.

Current Scholar Placement Information
(as of February 7, 2001)

Table A indicates the number of Scholars currently available for placement by discipline.

Table A.

2001 Scholars Available for Placement by Discipline		
Discipline	Availability	Matched
Family Practice	52	33
Internal Medicine	38	16
Obstetrics/Gynecology	13	5
Pediatrics	24	5
Psychiatry	8	5
Nurse Practitioner	26	22
Physician Assistant	30	23
Certified Nurse-Midwife	13	3

Table B indicates the first choice expressed by Scholars for site placement by NHSC region.

Table B.

2001 Scholars' First Choice of Placement by NHSC Region	
Region 1 (CT, ME, MA, NH, RI, VT)	17
Region 2 (NJ, NY, PR, VI)	24
Region 3 (DE, DC, MD, PA, VA, WV)	35
Region 4 (AL, FL, GA, KY, MS, NC, SC, TN)	54
Region 5 (IL, IN, MI, MN, OH, WI)	23
Region 6 (AR, LA, NM, OK, TX)	20
Region 7 (IA, KS, MO, NE)	4
Region 8 (CO, MT, ND, SD, UT, WY)	6
Region 9 (AS, AZ, CA, FM, GU, HI, MH, MP, NV, PW, TT, UM)	39
Region 10 (AK, ID, OR, WA)	15

For specific information about Scholars available for placement, contact Ralph Rack in the Provider Support Branch at (301) 594-4202.

Working Together to Reach 100% Access—Zero Health Disparities